

Exhibitor Reservation Application *(Please type or print clearly)*

Organization: _____
(As listing should appear)

Contact Person Name: _____
Last First Middle Initial

Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Fax: (____) _____

Email Address: _____

Courier (e.g., Federal Express) address *(if different from mailing address)*: _____

Names for Badges: _____
(FREE) (FREE)

Additional Names for Badges: _____
(Enclose \$50 for each additional name)

Exhibit Space Requested

☐ Level I (\$500) X _____ number of 8' X 10' spaces Amount enclosed _____

☐ Level II (\$1,000) X _____ number of 8' X 10' spaces Amount enclosed _____

☐ Level III (\$2,000) X _____ number of 8' X 10' spaces Amount enclosed _____

Booth location numbers _____ First choice
_____ Second choice
_____ Third choice

☐ Additional Exhibit Hall Only badges _____ @ \$50.00 each Amount enclosed _____

Total Enclosed _____

☐ CBO/NGO Village (free 6' table top space)

☐ Proof of nonprofit status enclosed

Payment can be paid in U. S. dollars by check or money order and **MUST** accompany this application for reservations to be considered. **Checks should be made out to the Academy for Educational Development.** No purchase orders will be accepted for exhibit reservations. Proof of nonprofit status for CBO/NGO Village applicants **MUST** accompany this application for reservations to be considered. Return the completed Exhibitor Reservation Application along with payment and/or proof of nonprofit status (for CBO/NGO Village applicants) to:

Academy for Educational Development
ATTENTION CCHS
1825 Connecticut Avenue, NW
Washington, D.C. 20009-5721

All reservation applications **and payments** must be received and/or postmarked by **June 18, 1999.**